Ø 003/006

PART B - FEE(S) TRANSMITTAL

Complete and send this to		Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885					
INSTRUCTIONS: This form sho appropriate. All further correspon indicated unless corrected below a maintenance fee notifications.	uld be used for trans dence including the P or directed otherwise	mitting the ISSUI atent, advance ord in Block 1, by (a)	E FEE and PUB ers and notificat apecifying a ne	LICATION FEE (if requision of maintenance foes we correspondence address;	ired). Blocks 1 through 5 will be mailed to the currer; and/or (b) indicating a se	should be completed where it correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDR	 -	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
7590 10/25/2003							
Thaddius J Carvis 102 North King Street Leesburg, VA 20176				Cell bereby certify that the States Postal Service addressed to the Mai transmitted to the USF	rdificate of Mailing or Tra his Fee(s) Transmittal is be- with sufficient postage for it il Suop ISSUE FEE addre TO (571) 273	ing deposited with the United first class mail in an envelope as above, or being facsimile adate indicated below.	
				THADI	714 3 - A	KVIS (Depositor's name)	
				74	madi X	(Signature)	
				<i>}</i>	an 26, 20t	(Date)	
APPLICATION NO	Application no Piling Date		FIRST NAMED INVENT		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/031,724 07/03/2003			William H. Sun 831.105-2 6123				
TITLE OF INVENTION: SELECT		ISSUE FE		PUBLICATION FEE	TOTAL FEE(5) DUE	DATE DUE	
					\$1700	01/25/2006	
nonprovisional	NO	\$1400		\$300	\$1700	01/23/2000	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
COOKE, COLLEEN P		1754		423-235000			
1. Change of correspondence addrec CFR 1.363). Change of correspondence a Address form PTO/SB/122) and "Fee Address" indication (or PTO/SB/47; Rev 03-02 or mon Number is required.	Correspondence	2. For printing on the parent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the dames of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESI	DENCE DATA TO B	E PRINTED ON T	HE PATENT (pi	nat or type)			
PLEASE NOTE: Unless an assectordation as set forth in 37 Cl	signee is identified be R 3.11. Completion of	low, no assignee of this form is NOT	iata will appear a substitute for	on the patent. If an assigning an assignment.	nes is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE	(B)	RESIDENCE: (CITY and STATE OR COUNTRY)					
Fuel Tech	ING		BATI	AVIA, IL			
Please check the appropriate assign	nee calegory or catego	ries (will not be pri	nted on the pater	u): 🗖 Individual 🗖 🤇	Corporation or other private	group entity Government	
4a. The following fee(s) are enclos	ed:	45	Payment of Fee	• •			
				A check in the amount of the fcc(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copie	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502. (enclose an extra copy of this form).						
			Dèposit Accoun	t Number	(enclose an extr	a copy of this form),	
5. Change in Entity Status (from a. Applicant claims SMALL	ENTITY status. See	7 CFR 1.27.			ALL ENTITY status. Sec 37		
The Director of the USPTO is requ NOTE: The Issue Fee and Publical interest as shown by the records of	ested to apply the Issu ion Fee (if required) v the United States Pate	Foe and Publicate ill not be accepted and Trademark	ion Fee (if any) o from anyone ou Office.	or to re-apply any previous ner than the applicant; a rep	ly paid issue fee to the apply gistered attorney or agent; o	lication identified above. r the assignee or other purty in	
Authorized Signature	addrest	1		Date	26 Jan. 20	06	
Typed or printed name	CHADDIY		4RVIS	Registration			
This collection of information is re an application. Confidentiality is g submitting the completed applications this form and/or suggestions for re	quired by 37 CER 1.3 overned by 35 U.S.C. on form to the USPT ducing this hurden. 87	11. The information 122 and 37 CFR 10. Time will vary to the	n is required to o 1.14. This collect depending upon Chief Informati	brain or retain a benefit by tion is estimated to take 12 the individual case. Any c on Officer, U.S. Patent and	the public which is to file (minutes to complete, inclu- comments on the amount of Trademark Office, U.S. D	and by the USPTO to process) ding gathering, preparing, and filme you require to complete epartment of Commerce, P.O.	

Box 1450. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PAGE 3/6 * RCVD AT 1/26/2006 1:08:27 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/29 * DNIS:2738300 * CSID:7037377813 * DURATION (mm-ss):02-30

01/30/2006 EFLORES1 00000013 502735 10031724

01 FC:1501

1400.00 DA

02 FC:1504

300.00 DA